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I have done little other than private duty nursing for twelve years, and rarely run across other nurses, so learn a great deal from reading my JOURNAL. Hoping that its life may be a long one, and that in reality the American Nurses' Association will own it entirely.

H. W. G.

District of Columbia.

II.

DEAR EDITOR: In answer to A. M. L.'s letter in the June number about sterilization for operations in private homes, I will give my method (which most likely many others use, too), which is as follows: Put water to the depth of six inches in the family wash boiler, adding three ounces lysol. Then take a piece of cotton, a flour sack will do, and tie over the top of the boiler by means of a string under the rim. Push the cloth down, making a hammock deep enough to hold all the dressings, sponges, towels, sheets, gowns, etc., to be used. Put on the cover and let it steam two hours. If the hammock does not hold all, one may have to sterilize twice. Have a clean bread pan into which a sterilized cloth is first spread, then pick out of the hammock (with dressing forceps, or, if none is at hand, two forks may be used) all the sterilized goods, which of course are wet. Spread another cloth over, and place in the oven till dry, about two hours. While the goods are sterilizing, sterilize gallon jars or some other suitable receptacles, one for each kind of the articles sterilized, into which the goods are placed when dry. I sometimes make muslin bags into which I put the goods before sterilizing, a bag or more for each kind, as the bags are easier to handle than each separate article. I have used the above method for many operations, laparotomies and others, and there has never been a single wound infection. Of course every nurse knows that forks or dressing forceps and hands must be sterilized before coming in contact with the sterile goods.

M. T. M. tells of having had two patients with deep fissured nipples. I have just finished a case where one nipple was retracted and the more the baby pulled, the more it retracted, and not a drop of milk came except with the milk pump. The other nipple was very short and the baby almost chewed it off trying to get hold, so the breast pump had to be used on both breasts and the baby fed the milk with a spoon. The baby was disgusted and the mother all tired out and asked to have the breasts dried up and the baby put on the bottle, to which the doctor finally consented. As a last resort I went and got a nipple at the country store which happened to be the "Mizpah" nipple. I placed it over the mother's nipple, and the baby took it without trouble. As soon as the baby starts pulling the nipple fastens to the breast and won't come off even after the baby is taken away until it is pulled off. It worked like a charm. The baby grunted with satisfaction and the mother was happier than at any time since the baby came, as she felt no pain and the milk flowed freely.

I do not think any other nipple would do, as it has a valve on the side which causes it to work so beautifully.

M. J.

Wisconsin.

TALKS TO SCHOOL CHILDREN

DEAR EDITOR: As a graduate nurse engaged in district visiting nursing, I am writing to ask you if you can offer any suggestions through the AMERICAN JOURNAL OF NURSING which will help me to outline a schedule for lecturing to, or rather talking to, the different grades of school children in our public school

here. The principal of the school has asked me to give twenty-minute talks at intervals during the coming fall and winter terms. It seems to me much might be done in this way for the moral uplifting of boys and girls, and in teaching them to care for their own physical welfare, but I have had no experience in this line. I have confidence enough to begin, and during the summer I could gather my materials if I can get just a few good suggestions.

The Northern Westchester D. N. A. employs six graduate nurses, one to each district—a wide territory, as we visit not only in the villages but in the surrounding country. Our Instructive Committee of the association in this district is eager to have me do something of this kind. If you can give me any suggestion or put me in the way of getting any, I shall feel very grateful to you.

A SUBSCRIBER.

[If the writer will look back to the JOURNAL for April, page 561, she may find Mrs. Lounsbery's suggestions helpful. In Book Reviews of this issue of the JOURNAL is the notice of a bibliography, which is a guide to existing literature on this subject.—ED.]

#### APPRECIATION

##### I.

DEAR EDITOR: I have always had the JOURNAL in partnership with a fellow nurse, but desire it sent individually now, as I have taken charge of a hospital as superintendent and anæsthetist. The JOURNAL is the best of its kind in the country. May you be provided with the means to carry it on to perfection, is my earnest wish.

J. M. D.

Illinois.

##### II.

DEAR EDITOR: I look forward to the coming of each number of the JOURNAL with pleasure, could not think of doing without it. Have taken it a year and a half, and it is such a help. After I talked to Miss DeWitt at our state convention and heard her talk on the JOURNAL I have been more interested than ever.

E. H.

Indiana.